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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Wenstrup, Brad, , Dr.,					1			
	(b) Address (number and street) 512 Missouri Avenue	☐ Check if address changed			Candidate's FEC Identification Number     H2OH02085				
	(c) City, State, and ZIP Code						ew	Amended	
	Cincinnati		Ol	H 4522	26-1121	Statement X (N	l) OR	(A)	
4.	Party Affiliation	5. Office Soug	ht			rict of Candidate			
	REPUBLICAN PARTY	House			ОН	02			
	DE	SIGNATIO	N OF PR	INCIPAL	. CAMPAIGN	N COMMITTEE			
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
	Wenstrup for Congr	ess							
	(b) Address (number and street) PO Box 9551								
	(c) City, State, and ZIP Code								
	Cincinnati				ОН	45209-0551			
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.									
NOTE: This designation should be filed with the principal campaign committee.									
(a) Name of Committee (in full)  Brad Wenstrup Victory Fund									
	(b) Address (number and street) PO Box 30844								
	(c) City, State, and ZIP Code								
	Bethesda				MD	20824			
	I certify that I have exa	mined this State	ement and to	o the best of	<sup>r</sup> my knowledge a	nd belief it is true, correct	and complet	e.	
Si	gnature of Candidate					Date			
W	enstrup, Brad, , Dr.,			[Elec	ctronically Filed]	12/30/2016			
N	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								

FEC FORM 2 (REV. 02/2009)